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C. GOLDEN FEB - 9 2019

COVER LETTER

	Registratio Division of	n Section Corporations				
eun iez		SHIPPING LINE LLC				
SUBJEC	Name of Limited Liability Company					
The enclo	sed Article:	s of Amendment and fee(s) are submitted for filing.				
Please ret	urn all corre	espondence concerning this matter to the following:				
		CHRISTOPH ZAMY				
		Name of Person				
		Firm/Company				
		14087 WEST DIXIE HWY				
		Address				
		NORTH MIAMI FL 33161				
		City/State and Zip Code				
		ZAMYCHRISTOP@GMAIL.COM				
		E-mail address: (to be used for future annual report notification)				
For furthe	er information	on concerning this matter, please call:				
CHRIST	OPH ZAM					
	Nar	at () me of Person Area Code Daytime Telephone Number				
Enclosed	is a check f	or the following amount:				
\$25.0	0 Filing Fee	e S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)				

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2019 FEB -4 AM 9: 41

TO GO SHIPPING LINE LLC		THE STATE
(<u>Name of the Limited</u> (A	Liability Company as it now appears on our records.) Florida Limited Liability Company)	n in an SSEE, FL
-		and assigned
Florida document number 1.17000215040	·	
This amendment is submitted to amend the follow	ring:	
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) the Articles of Organization for this Limited Liability Company were filed on 10/17/2017 and assigned dorida document number 1.17000215040 this amendment is submitted to amend the following: If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Inter new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS)		
The new name must be distinguishable and contain the word	ds "Limited Liability Company," the designation "LLC" o	r the abbreviation "L.L.C."
Enter new principal offices address, if applicab	ole:	
(Principal office address MUST BE A STREET	ADDRESS)	
		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	<u> </u>	
		enter the name of the new
Name of New Registered Agent:		
New Pagistered Office Address		
New Registered Office Address.	Enter Florida street address	
	, Flori	da
	City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	ZAMY CHRISTOPH	14087 WEST DIXIE HWY NORTH MIAMI FL 33161	
			Remove
			Change
MGR	MARIE LAURA CADEAU	980 NE 170 ST APT 108 MIAMI FL 33162	Add
			■ Remove
			☐ Change
			Add
			☐ Remove
			☐ Change
			☐ Remove
			□ Change
			
			□ Remove
			Change
			Add
			□ Remove
			☐ Change

is. It amending any other mit	rmation, enter change(s) here: (Attach addition	an one cas, y necessarys,
		
. == =		
		
 		
		
 		
		
		
E. Effective date, if other tha	n the date of filing:	(optional)
(If an effective date is listed, the da Note: If the date inserted in t	e must be specific and cannot be prior to date of filing or mornis block does not meet the applicable statutory filing he Department of State's records.	e than 90 days after filing.) Pursuant to 605.0207 (3)(
If the record specifies a del (b) The 90th day after the	ayed effective date, but not an effective tir record is filed.	ne, at 12:01 a.m. on the earlier of:
Dated 01/30/	2019	
2.0	<u></u>	
700	Signature of a member or authorized representative o	f a member
ZAMY CHRISTO	P11	

Page 3 of 3

Typed or printed name of signec

Filing Fee: \$25.00